



DUVAL COUNTY COMMUNITY HEALTH IMPROVEMENT PLAN 2017 - 2022

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Table of Contents

Executive Summary	1
Acknowledgements	4
Methods	6
MAPP Process Overview	6
Phase 1: Organize for Success/Partnership Development	8
Phase 2: Visioning	9
Phase 3: The Four MAPP Assessments Forces of Change Assessment Local Public Health System Assessment Community Themes and Strengths Assessment Community Health Status Assessment	10 11 12
Phase 4: Identifying Strategic Issues	14
Phase 5: Formulating Goals	15
Phase 6: The Action Cycle	17
Community Health Improvement Plan Timeline	20
Strategic Issue Areas	22
Strategic Health Priority Area #1: Healthy Families and Healthy Babies	
Strategic Health Priority Area #2: Healthiest WeightPolicies and Programs	
Strategic Health Priority Area #3: Behavioral Health	
Strategic Health Priority Area #4: Access to Care	
Appendices	43
Appendix A: Alignment	44

Executive Summary

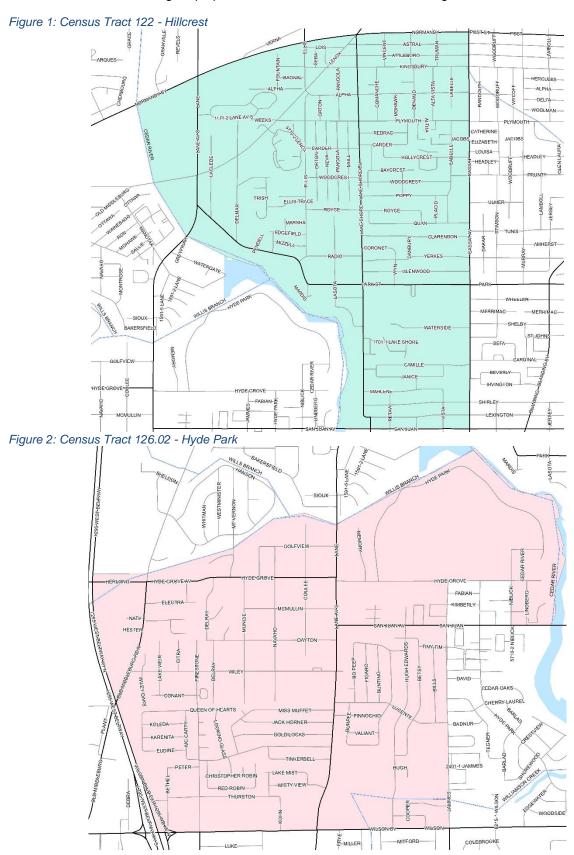
The Florida Department of Health in Duval County (DOH-Duval) initiated a new community health improvement process in 2016. Local public health system partners joined forces to develop the 2017-2022 Duval County Community Health Improvement Plan (CHIP). A CHIP is a strategic plan to address public health priorities in a community and defines how public health system partners will work together to improve the health of Duval County. Critical sectors invited to participate in the development of Duval County's CHIP included local hospitals and health care organizations, local government, community-based organizations, faith-based organizations, social service organizations, and educational institutions.

Utilizing the National Association of City and County Health Official's (NACCHO) Mobilizing for Action through Planning and Partnerships (MAPP) framework, the planning team engaged in a comprehensive community health assessment (CHA). The findings from the CHA were reviewed, analyzed, and synthesized to inform the development of Duval County's CHIP. Strategic health priorities were identified through a facilitated process that examined cross-cutting strategic issues that emerged in the CHA. When establishing health priorities for Duval County's CHIP, feasibility, impact on health outcomes, and the promotion of health equity were considered. Through this process, strategic health priority areas were identified for Duval County's CHIP:

- Healthy Families and Healthy Babies: Infant mortality is a key measure of a population's health.
 Significant racial and ethnic disparities in infant mortality exist. In Duval County, black babies are
 2.5 times more likely to die before their first birthday than white babies. The goal for this strategic priority is to reduce infant mortality and morbidity in Duval County.
- **Healthiest Weight:** Contributing factors to obesity include physical inactivity, poor nutrition, and lack of access to healthy foods. Obesity increases the risk for health conditions such as coronary heart disease, type 2 diabetes, cancer, hypertension, and stroke. In Duval County, 65.4% of adults and 29.0% of middle and high school students are overweight or obese. Goals to address healthiest weight include: 1) increasing the percent of children and adults who are at a healthy weight and 2) increasing access to nutritious and affordable food.
- Behavioral Health: Behavioral health is essential to a person's overall health and well-being, healthy interpersonal relationships, and the ability to live a full and productive life. On average, adults in Duval County report having four poor mental health days in the past 30 days. Goals to improve behavioral health include: 1) reducing deaths due to suicide and 2) reducing opioid overdose deaths.
- Access to Care: Addressing access to care can reduce barriers to achieving optimal health such
 as inadequate transportation, cultural or linguistic barriers, and economic barriers. Lack of or
 inadequate insurance coverage is one of the biggest barriers to accessing healthcare. In Duval
 County, 12.3% of residents lack health insurance. The goal for this strategic priority is to decrease
 barriers to accessing care.
- **Health Equity:** When creating a community in which all residents can achieve optimal health, it is important to consider the multiple factors that influence health. Clinical care has a relatively small impact on the overall health of a community (University of Wisconsin Population Health Institute, 2014). Given our growing understanding of the social, economic, and environmental factors that determine health outcomes, building a healthy, equitable community was identified as a cross-cutting strategy to improve health outcomes.

The strategic health priorities guided the development of goals, objectives, and key activities that will be implemented to promote optimal health and well-being in Duval County. Because where we live, work, learn, and play significantly impacts our health and well-being, a place-based approach was adopted for implementation for Duval County's CHIP. A place-based approach to chronic disease prevention and health promotion focuses on creating healthy neighborhoods so that all residents have the opportunity to reach their full health potential. As our community partners moved from the planning to implementation phases, data was reviewed at the sub-county level (e.g., zip code and census tract) to aid in the selection of specific neighborhoods within Duval County for targeted health improvement efforts. Based on the review of demographic, social, and health indicators, two neighborhoods in the Westside of Jacksonville (Hillcrest and Hyde Park) were selected as areas of focus for implementation of Duval County's CHIP. Moving forward, health improvement activities and initiatives will be tailored to meet the unique needs of these two neighboring

census tracts. The following maps provide a more detailed view of the neighborhoods.



Duval County's CHIP is reviewed annually with both community partners and residents, as well as DOH-Duval's Performance Management Council (PMC). On February 15th, 2019, community partners convened to review the CHIP. There were over 50 community members in attendance representing various sectors of the local public health system. During this meeting, feedback from community partners was gathered that informed the revision of objectives included in Duval County's CHIP. In addition to these revisions, Duval County's CHIP was extended from 2019 to 2022. Following the community meeting in February, DOH-Duval's PMC conducted an annual review of Duval County's CHIP. The meeting, which was held on March 18th, 2019, served as an opportunity to review proposed revisions, provide updates on progress and next steps, and discuss challenges and barriers encountered. We will continue to review and revise Duval County's CHIP annually to meet emerging challenges and opportunities.

The Community Health Assessment and the Community Health Improvement Plan are community-driven processes. As a member of the community, we welcome your feedback and collaboration to achieve the goals established in Duval County's CHIP. For more information or to become involved contact the Florida Department of Health in Duval County, Healthy Jacksonville at HealthyJacksonville.net.

Acknowledgements

The Florida Department of Health in Duval County (DOH-Duval) would like to extend our sincere appreciation and gratitude to the diverse community members who contributed to this comprehensive body of work. Community collaboration and partnership are essential to both the Community Health Assessment and the Community Health Improvement Plan. Participation from a broad spectrum of community member is paramount when identifying health priorities and developing a comprehensive, community-wide plan to address them.

Participating Organizations:

Ability Housing

AARP

Agape Community Health Center Agency for Healthcare Administration Alliance for a Healthier Generation

America Walks

American Foundation for Suicide Prevention

American Heart Association American Lung Association

Baptist Health

Beaches Emergency Assistance Ministry Boys and Girls Clubs of Northeast Florida

CareerSource

Changing Homelessness

Chartwells

City of Jacksonville Clara White Mission Clinton Health Matters

Community Benefit Partnership

Community Connections of Jacksonville

Community Health Outreach Community Rehabilitation Center **Duval County Medical Society Duval County Public Schools**

Drug Free Duval **Edward Waters College**

ElderSource

Episcopal Children's Services

Fatherhood PRIDE Feeding Northeast Florida

First Coast YMCA

First Coast Worksite Wellness Council

Florida Beverage Association Florida Blue Foundation

Florida Department of Children and Families Florida Department of Health in Duval County

Florida State Attorney's Office Florida State College at Jacksonville Full Service Schools of Jacksonville **Gateway Community Services Growing Parenting Choices** Groundwork Jacksonville

Health Planning Council of Northeast Florida

Heart for Children, Inc. Hispanic Medical Society

Humana

IM Sulzbacher Center Jacksonville Area Legal Aid Jacksonville Chamber of Commerce

Jacksonville City Council

Jacksonville Children's Commission Jacksonville Community Council, Inc. Jacksonville Fire and Rescue Department

Jacksonville Housing Authority

Jacksonville Metropolitan Community Benefit

Partnership

Jacksonville Regional Health Collaborative

Jacksonville Sheriff's Office

Jacksonville Transportation Authority

JASMYN JAXUSA

Kids Hope Alliance Lifeline Resources LSF Health Systems Lutheran Social Services Magellan Complete Care

Mayo Clinic Mayor's Office Memorial Hospital

Mental Health America of Northeast Florida

Mind over Music Movement

Molina Healthcare New Town Success Zone

Northeast Florida Area Health Education Center

Northeast Florida Healthy Start Coalition

Northwest Jacksonville Community Development

Corporation

Nova Southeastern University Partnership for Child Health Pastoral Counseling Services

Planned Parenthood

The PLAYERS Center for Child Health

Publix Supermarkets

River Point Behavioral Health River Region Human Services

The Salvation Army of Northeast Florida

Special Olympics Florida St. Vincent's Health Care Timucuan Parks Foundation Tobacco Free Jacksonville

UF Center for Health Equity and Quality Research UF Institute for Food and Agricultural Sciences

United Way of Northeast Florida

University of North Florida

US Department of Veteran's Affairs

Volunteers in Medicine War on Poverty We Care Jacksonville Wellcare Wolfson Children's Hospital Youth Crisis Center

Community Health Improvement Plan

STRATEGIC PRIORITIES

STRATEGIC 1

Healthy Families and Healthy Babies



GOALS:

• Reduce infant mortality and morbidity

PRIORITY 2
Healthiest Weight



GOALS:

- Increase the percent of children and adults who are at a healthy weight
- Increase access to nutritious and affordable food

STRATEGIC PRIORITY

Behavioral Health



GOALS:

- Reduce suicide deaths
- Reduce opioid overdose deaths

STRATEGIC PRIORITY

Access to Care



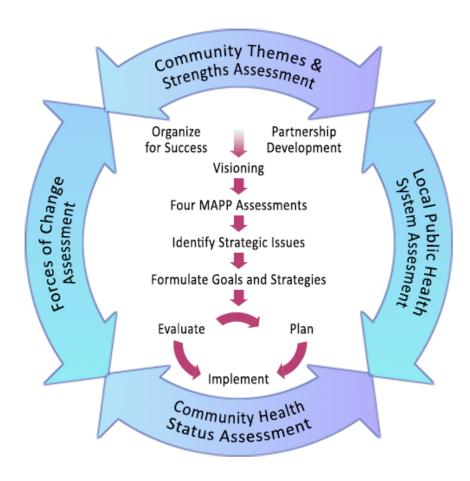
GOALS:

• Decrease barriers to accessing care

Methods

MAPP Process Overview

A Community Health Improvement Plan (CHIP) is a long-term, strategic plan that defines how local public health system partners will work together to improve the health of Duval County. The local public health system includes all people and organizations that contribute to the health of those who live, work, learn, and play in a community. Local public health system partners convened to develop the 2017-2022 Duval County CHIP. The Mobilizing for Action through Planning and Partnerships (MAPP) framework guided the development of Duval County's CHIP. The MAPP framework helps communities conduct a comprehensive community health assessment, identify and prioritize public health issues, and develop goals and strategies to address them.

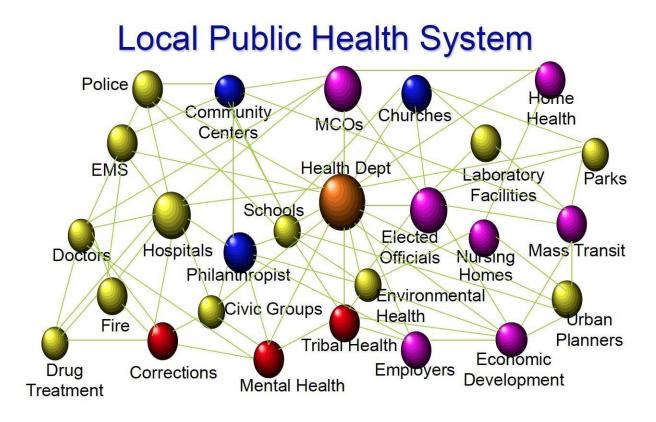


The MAPP process consists of 6 phases outlined below:

- Phase 1: Organize for Success/Partnership Development
 - Lead organizations begin planning the MAPP process and enlisting other community organizations to participate in the process.
- Phase 2: Visioning
 - The community develops a shared vision for Duval County and common values to determine an ideal end point for the MAPP process.
- Phase 3: The Four MAPP Assessments
 - 1. Forces of Change Assessment: The impact of forces, such as legislation and technology, that affect the context of the community are evaluated.
 - 2. Local Public Health System Assessment: Comprehensively examines organizations from across multiple sectors and their contribution to the public's health.
 - 3. Community Themes and Strengths Assessment: Examines health issues Duval County residents feel are important and the assets the community possesses to address those issues.
 - 4. Community Health Status Assessment: Investigates health outcomes and quality of life at a detailed level. Health issues are identified and highlighted by gathering data for a variety of indicators and analyzing differences across time periods, among population subgroups, or with peer, state, or national data.
- Phase 4: Identify Strategic Issues
 - This phase takes data from all four assessments and identifies the most critical issues that must be addressed for Duval County to achieve its vision.
- Phase 5: Formulating Goals and Strategies
 - After identifying a list of strategic issues, broader goals addressing these issues are created and specific strategies to meet these goals are developed.
- Phase 6: Action Cycle
 - Strategies are planned, implemented, and evaluated in a continuous cycle which celebrates successes and adapts to new challenges.

Phase 1: Organize for Success/Partnership Development

The first phase of the MAPP process involves building commitment among partners, engaging and educating participants, setting the stage for sustained commitment, and planning for success. Creating an effective CHIP requires participation and commitment from local public health system partners. Sectors invited to participate in the development of Duval County's CHIP included local hospitals and health care organizations, local government, community based organizations, social service organizations, and schools. For a complete list of organizations involved in the planning process, please refer to the "Acknowledgements" section (pages 4-5) of this document.



Phase 2: Visioning

One of the first steps in this collaborative process was the development of a shared vision for a healthier Duval County. A community's vision statement provides direction and focus for the community health improvement planning process. In a January 2016 meeting, MAPP Steering Committee members met to establish a mission, vision, and core values for the MAPP process. Prior to developing a vision for a healthier Duval County, partners participated in the Privilege Walk. The purpose of this activity is to demonstrate how power and privilege can affect our lives even when we are not aware that it is happening. MAPP Steering Committee members were asked to line up side by side and to take steps forward (or steps backward) in response to specific statements, such as, "Take a step forward if you are a White male." After the activity, the group reflected on the effects of power and privilege on opportunity, access, and health outcomes.

Following the Privilege Walk, a mission, vision, and core values were developed through facilitated group discussion using the questions below:

- Mission and vision questions:
 - 1. What does a healthy community mean to you?
 - 2. How do you envision the local public health system in the next five years?
 - 3. What are characteristics of a healthy community for all who live, work, learn, and play in Duval County?
 - 4. In five years, if Duval County successfully worked together to achieve health equity, what would we have accomplished?
- Value questions:
 - 1. What needs to be in place for us to work together effectively to achieve our vision?
 - 2. What type of working environment is necessary for our partnership to achieve its vision?
 - 3. What are some ground rules to ensure that we are all working effectively to achieve our vision?

Access Quality health care and or

Access – Quality health care and community services should be accessible and affordable to all.

Core Values

Best practices – Efforts will be informed by evidence, science, and innovation.

Collaboration – The local public health system will coordinate activities, share resources, and align efforts to improve community health outcomes.

Equity – A healthier community will be achieved by assuring every person has the opportunity to attain their full health potential.

Prevention – A healthy community promotes healthy lifestyles and behaviors, provides health education, and ensures equal access to opportunities for physical activity, fresh produce, and health care.

Safety – All community members have the right to live, work, learn, and play in a safe environment.

Mission

To protect and promote optimal health and well-being for all who live, work, learn, and play in Duval County.

Vision

Duval County will become one of the healthiest communities in the nation.

Phase 3: The Four MAPP Assessments

Forces of Change Assessment

In February 2016, 15 key community stakeholders that are members of the larger MAPP Steering Committee convened to conduct the Forces of Change (FoC) Assessment. The committee identified a list of trends, factors, and events that could affect the health of Duval County in the next two to three years.

- <u>Trends</u> are patterns over time such as migration in and out of a community or a growing disillusionment with government.
- <u>Factors</u> are discrete elements such as a community's large ethnic population, an urban setting, or the jurisdiction's proximity to a major waterway.
- <u>Events</u> are one-time occurrences such as a hospital closure, a natural disaster, or the passage of new legislation.

NACCHO's MAPP planning manual was used to design the FoC Assessment. An email was distributed prior to the meeting requesting that the MAPP Steering Committee reflect on issues that may impact the community in the next two to three years. During the assessment, attendees were charged with answering the following questions:

- What is occurring or might occur that affects the health of the community or the local public health system?
- What specific threats and opportunities are generated by these occurrences?

To answer these questions, meeting attendees were placed in small groups to explore the economic, environmental, political, scientific, social, and technological forces that impact Duval County and its local public health system. For each identified force, potential threats and opportunities were brainstormed.

The assessment resulted in a comprehensive, focused list identifying key forces affecting health in Duval County. The MAPP Steering Committee reviewed all identified forces and selected those which were most significant in Duval County (see below).

Adult/childhood obesity

Affordable Care Act

Built environment

Employment opportunities

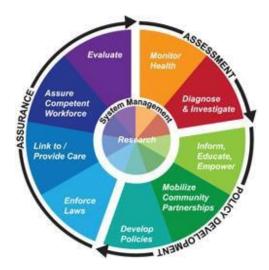
Food availability
Infant deaths
Mental health
Social media

Local Public Health System Assessment

The MAPP Steering Committee selected a proven national assessment instrument, called the National Public Health Performance Standards Program (NPHPSP), to perform the Local Public Health System Assessment (LPHSA). The LPHSA assessment can help identify strengths and weaknesses and determine opportunities for improvement. This assessment sought to answer the following questions:

- What are the activities and capacities of our public health system?
- How well are we providing the 10 Essential Public Health Services in our jurisdiction?

Three workgroups were held in March and April 2016 to determine how effectively the local public health system performs each of the 10 essential public health services in Duval County. Workgroup participants answered questions about each essential service and scored each service based on the criteria provided in the NPHPSP instrument. By sharing their diverse perspectives, all participants gained a better understanding of each organization's contributions, the interconnectedness of activities, and how the public health system can be strengthened.



Results from the LPHSA indicate that in Duval County:

- 40% essential service scores were optimal
 - Monitor health status to identify and solve community health problems
 - Diagnose and investigate health problems and health hazards in the community
 - o Inform, educate, and empower people about health issues
 - Enforce laws and regulations that protect health and ensure safety
- 50% of essential service scores were significant
 - o Mobilize community partnerships and actions to identify and solve health problems
 - o Link people to needed personal health services and assure the provision of health
 - Assure a competent public and personal health care workforce
 - Evaluate effectiveness, accessibility, and quality of personal and population-based health services
 - Research for new insights and innovative solutions to health problems
- 10% of essential service scores were moderate
 - Develop policies and plans that support individual and community health efforts

Community Themes and Strengths Assessment

The purpose of the Community Themes and Strengths Assessment (CTSA) was to gather community thoughts, opinions, and concerns that provide insight into the issues of greatest importance to the community. The MAPP Steering Committee utilized two different approaches to gather information from the community. The first approach was to distribute a community survey, and the second approach was to examine data collected through community town hall meetings, focus groups, and key informant interviews.

This assessment provided a deep understanding of the health issues that residents felt are important by answering the following questions:

- What is important to our community?
- How is quality of life perceived in our community?
- What assets do we have that can be used to improve community health?

Qualitative Data Approach

Twenty-three key informant interviews, focus groups, and town hall meetings were conducted in Duval County. The 114 participants in this process provided insight on a wide range of community health issues, including barriers to accessing health services, prevalence of certain health conditions, social determinants of health, and health disparities faced by the residents of Duval County. Health priorities identified in town hall meetings, focus groups, and key informant interviews included:

- Insufficient health education
- Lack of knowledge about services
- Lack of transportation
- Lack of affordable care
- Poor mental health

Quantitative Data Approach

A survey was developed to gather information on health and quality of life in Duval County. The survey was distributed using a number of methods and 513 surveys were completed during May 26, 2016 – July 22, 2016. Of those who responded to the survey, 70% described themselves as healthy, 19% described Duval County as healthy, and 73% felt safe where they lived.

The most frequently mentioned community strengths in Duval County identified in the community survey included:

- Access to healthy foods
- Safe areas to walk
- Clean environment

The most frequently mentioned health concerns in Duval County identified in the community survey included:

- Addiction
- Violence
- Mental health
- Adult obesity
- Sexually transmitted diseases

Community Health Status Assessment

The Community Health Status Assessment (CHSA) provides quantitative data on health status, quality of life, and risk factors. This assessment answers the following questions:

- How healthy are our residents?
- What does the health status of our community look like?

The results of the CHSA provided the MAPP Steering Committee with a comprehensive view of the County's health status, and identified challenges and opportunities for improvement. The CHSA examined core indicators, including demographic and socioeconomic characteristics, health resource availability, behavioral risk factors, behavioral health, maternal and child health, and communicable diseases. The CHSA identified the following top health priorities for Duval County: 1) Maternal and child health, 2) Weight, physical activity, and diet, 3) Behavioral health, and 4) Built environment.

Duval County Health Profile 2016

	Duval	Florida	Duval Trend
Deaths			
All-cause death rate	834.7	686.2	$lack \psi$
Years of potential life lost under 75	9,794.0	7,953.2	1
Chronic Disease			
Coronary heart disease death rate	95.2	95.5	Ψ
Stroke death rate	40.3	38.5	Ψ
Diabetes death rate	23.2	20.1	Ψ
Infectious Disease			
Chlamydia cases	714.3	468.2	1
Gonorrhea cases	292.1	139.2	7
HIV/AIDS death rate	5.9	3.9	Ψ
Maternal and Child Health			
Infant mortality rate	8.4	6.1	T
% Births w/o 1st trimester prenatal care	33.9	21.6	T
% Low birth weight	10.0	8.7	<u> </u>
Weight, Activity, and Diet	05.4	00.0	
% Adults who are overweight or obese	65.4	63.2	¥
% Adults who are sedentary	26.7	29.8	
% Adults who consume less than 5 servings of fruit/vegetables per day	82.7	81.7	Т
Social and Mental Health	4.4	2.0	
Bad mental health days in past 30 days	4.1	3.6	X
% Attempted suicide (high school)	18.9	7.6	T
Suicide death rate	13.1	14.1	V
Built Environment	20.0	20.0	
% within ½ mile of a healthy food source	20.0	30.9	
% within ½ mile of a fast food restaurant	37.0	33.9	
% within ½ mile of park	43.6	43.2	

Data Note(s): The values above in **green** favorably exceed the state value. The values above in **red** do not favorably exceed the state level. Deaths rates are per 100,000 population. Infant mortality is per 1,000 live births.

Phase 4: Identifying Strategic Issues

Strategic issues are challenges that must be addressed in order to achieve the community's vision for a healthier Duval County. During a July 2016 meeting, MAPP Steering Committee members reviewed and synthesized findings from the four MAPP assessments. Meeting attendees worked in small groups to discuss the assessment findings and explore convergence among the MAPP assessments. After each group identified three to four themes, each meeting attendee received four stickers to apply to the top four health priorities facing Duval County. Meeting attendees were requested to consider the following criteria when selecting health priorities:

Relevance

- Burden
- · Severity of problem
- Economic cost
- Urgency
- · Community concern
- Focus on equity and accessibility

Appropriateness

- Ethical and moral issues
- Human rights issues
- Legal aspects
- Political and social acceptability
- Public attitudes and values

Impact

- Effectiveness
- Builds on current work
- · Moves the needle
- Demonstrates measurable outcomes
- Addresses multiple wins

Feasibility

- Community capacity
- · Technical capacity
- Economic capacity
- Political capacity
- Socio-cultural aspects

The MAPP Steering Committee members voted for the issues below to become strategic priority areas in Duval County's CHIP. Initially, health equity was identified as a priority area for the CHIP. However, following discussion, addressing health inequities was identified as a cross-cutting strategy that will be integrated across all strategic priority areas.



Phase 5: Formulating Goals

During this phase, the MAPP Steering Committee worked to identify major goals for each of the four strategic health priorities. During an August 2016 meeting, goals were created for each strategic health priority through small group activities and facilitated discussion. The process to formulate goals began with a summary of the identified health priority areas, review of health assessment data, and discussion of the key components of effective action plans.

Following the creation of overarching goals for each health priority area, work groups met beginning in August 2016 to discuss key activities, contributing partners, process measures for monitoring and evaluation, timeframes, and key deliverables. Throughout the process, draft action plans were shared with the MAPP Steering Committee for feedback and discussion. An overview of the strategic health priorities, goals, and objectives are summarized in the table on the following page. The goals and objectives will be reviewed and revised annually based on ongoing assessment of the availability of resources and data, community readiness, current progress, and unique needs of Duval County residents.

HEALTH PRIORITY GOALS OBJECTIVES AREAS 1.1 Reduce infant mortality and 1.1a By December 2021, reduce the black-white infant mortality **HEALTHY FAMILIES AND** morbidity gap from 2.5 to 2.2 **HEALTHY BABIES** 1.1b By December 2021, increase births to mothers who receive prenatal care beginning in the first trimester from 66.1% to 2.1 Increase the percent of children and 2.1a By December 2021, increase the percentage of adults who **HEALTHIEST WEIGHT** adults who are at a healthy weight have a healthy weight from 32.6% to 35.9% 2.2a By December 2021, decrease the percentage of the 2.2 Increase access to nutritious and population who lack adequate access to food from 20.1% to affordable food 18.1% 3.1 Reduce suicide deaths in Duval **BEHAVIORAL HEALTH** 3.1a By December 2021, decrease the age-adjusted County suicide death rate from 13.1/100,000 to 11.8/100,000 3.2 Reduce opioid overdose deaths in 3.2a By December 2021, reduce opioid overdose deaths **Duval County** from 38.6/100,000 to 34.7/100,000 4.1a By December 2021, reduce the HIV incidence rate in 4.1 Decrease barriers to accessing care **ACCESS TO CARE** Duval County from 30.0/100,000 to 27.0/100,000 4.1b By December 2021, reduce the incidence rate of bacterial STDs in Duval County from 1,049.9/100,000 to 944.9/100,000 4.1c By December 2021, decrease the rate of preventable hospitalizations under the age of 65 from all conditions from 1,416.2/100,000 to 1,274.6/100,000

Phase 6: The Action Cycle

Strategic priority area committees were formed to complete the CHIP Action Cycle. Each committee discussed available resources and how these resources may be used to achieve CHIP goals and objectives. For each strategic issue area, committees discussed key activities, responsible persons, coordinating agencies, process measures for monitoring and evaluation, timeframes, and key deliverables. These discussions resulted in the development of action plans for each strategic issue area.

To narrow down the activities and develop an actionable, measurable plan, DOH-Duval employed the Results-Based Accountability (RBA) Model, which focuses on population health improvement as the end goal, with program performance as a means to that end. The usefulness of the RBA approach is that it starts with the desired end in mind (outcome) and develops a set of evidence-based, targeted strategies to attain the outcome. Also, RBA is the framework used for Turning the Curve, a process of positively changing the course of unwanted health trends through the development of performance standards and measures, progress reports, and ongoing performance and quality improvement. RBA is the model and Turning the Curve is the process used to improve population health outcomes. This approach addresses how DOH-Duval will work, in coordination with community partners, to improve priority health issues in order to alleviate and prevent poor health outcomes in Duval County.

In January 2018, priority area committees were invited to participate in a Turn the Curve discussion activity. Participants reviewed relevant data, contributed to the story behind the data, discussed existing community program or interventions, and offered insight into

Population

Results

Experience

Indicators Baselines

(Data Development Agenda)

Story behind the baselines
(Information & Research Agenda about Causes)

Partners

What works
(Information & Research Agenda about Solutions)

Criteria

Strategy and Action Plan

possible contributing partners. The information from this activity was used to further refine the action plans for each strategic priority area.

After identifying goals and objectives, community partners turned their attention to developing actionable plans. Because where we live, work, learn, and play significantly impacts our health and well-being, a place-based approach was adopted for implementation for Duval County's CHIP. A place-based approach to chronic disease prevention and health promotion focuses on creating healthy neighborhoods so that all residents have the opportunity to reach their full health potential. In order to identify specific neighborhoods within Duval County for targeted health improvement efforts, data was compiled and reviewed at the subcounty level (e.g., zip code and census tract). The result of this process was the identification of two neighborhoods on the Westside of Jacksonville, Hillcrest and Hyde Park. Moving forward, health improvement activities and initiatives will be tailored to meet the unique needs of these two neighboring census tracts. The following table includes select data indicators for these neighborhoods.

Community Status and Health Profile 2012 – 2016

	Duval County	Hillcrest (CT 122)	Hyde Park (CT 126.02)
Total Population	900,890	7,563	5,576
Race, of any Ethnicity			
White (%)	61.2	47.3	41.3
Black or African American (%)	29.4	48.1	57.3
American Indian and Alaska Native (%)	0.2		
Asian (%)	4.4	3.5	1.4
Native Hawaiian and Other Pacific Islander (%)	0.1		
Some other race (%)	1.2		
Two of more races (%)	3.5	1.0	
Hispanic or Latino			
Hispanic or Latino, of any race (%)	8.6	5.1	2.3
Poverty			
Families under 100% of poverty (%)	12.7	38.9	15.7
With children under 18 years (%)	20.4	57.4	18.3
With children under 5 years (%)	19.9	62.4	33.6
People under 100% of poverty (%)	16.6	42.6	22.0
Employment Status			
Civilian labor force unemployed (%)	8.6	14.8	17.8
Income and Benefits			
Median household income (\$)	49,196	24,063	35,000
Total households	341,906	2,872	2,202
With earnings (%)	78.4	74.3	79.7
With social security (%)	27.6	22.2	22.1
With retirement income (%)	18.8	14.5	17.7
With Supplemental Security Income (%)	5.2	8.1	6.5
With cash public assistance income (%)	2.8	4.6	2.4
With Food Stamp/SNAP benefits (%)	15.9	33.0	21.8
Health Insurance Coverage			
With health insurance coverage (%)	86.2	83.7	79.2
With private health insurance (%)	63.9	38.5	53.4
With public coverage (%)	32.9	54.8	37.8
No health insurance coverage (%)	13.8	16.3	20.8
Occupied Housing Unit Characteristic			
With no vehicles available (%)	8.4	16.7	15.4
With 1 vehicle available (%)	39.6	44.1	42.1
With 2 vehicles available (%)	38.1	30.2	34.9
With 3 or more vehicles available (%)	14.0	9.0	7.5
Chronic Disease (2012-2016)			
Stroke deaths (per 100,000)	42.0	57.1	50.3
Heart disease deaths (per 100,000)	180.5	182.7	204.6
Cancer deaths (per 100,000)	180.6	162.7	194.6
Maternal and Child Health (2012-2016)			
Infant deaths	539	14	13
Total births	63,859	863	441
Births to mothers with 1st trimester prenatal care (%)	70.1	54.1	54.6
Preterm births (less than 37 weeks gestation) (%)	13.5	16.9	20.2
Births under 2500 grams (low birth weight) (%)	9.7	11.1	13.6
Births covered by Medicaid (%)	50.1	82.6	71.2
Births to mothers who were obese prior to pregnancy (BMI	27.2		
30+) (%)	27.2	37.0	34.7
Births to mothers with less than a high school education (%)	13.7	22.5	19.0
Weight and Activity (2016)			
Adults who are obese (%)	31.3	37.8	36.5
Adults with no leisure-time physical activity (%)	28.2	40.0	34.6

During the next year, local public health system partners will continue to work together to address the strategic objectives outlined in Duval County's CHIP. Although committees have not identified any specific policy changes to be included in the CHIP at this time, opportunities for policy change will continue to be evaluated. Action plans will be further developed and implemented, and progress will be monitored at quarterly meetings of the Performance Management Council (PMC). Work teams and leads will continue to be identified in order to ensure successful implementation and monitoring of the activities outlined in Duval County's CHIP. An Advisory Committee has been developed to oversee implementation and monitoring of the CHIP action plans. The Committee is made up of community partners that are subject-matter experts in one or more of the fields associated with the CHIP's goals and have been actively involved with this health improvement process since its inception. The CHIP Advisory Committee will meet on a quarterly basis to review the status of each objective and progress made to date, as well as to identify strategies to overcome barriers to reaching strategic objectives.

The implementation of the CHIP will help strengthen the public health infrastructure, aide and guide planning, foster collaboration, and promote the health and well-being of Duval County residents. As a living document, Duval County's CHIP will be reviewed and revised annually based on ongoing assessment of the availability of resources and data, community readiness, current progress, and alignment with goals.

Community Health Improvement Plan Timeline

December 2015	Identified and contacted community partners from a broad spectrum of sectors to build commitment and engagement in the Duval County Community Health Improvement Plan (CHIP)
January-June 2016	Gathered the community's perspective on health and well-being in Duval County through 11 key informant interviews, 8 focus groups, and 4 town hall meetings in collaboration with local not-for-profit hospitals conducting a Community Health Needs Assessment (CHNA)
January 29, 2016	First meeting of the MAPP Steering Committee to provide an overview of the CHIP process and develop a shared mission, vision, and core values for a healthier Duval County
February 19, 2016	The Forces of Change (FoC) Assessment was completed
March-April 2016	The Local Public Health System Assessment (LPHSA) was completed
May-June 2016	Community Themes and Strengths Assessment (CTSA) survey was distributed community-wide and completed by 513 individuals via paper-pencil surveys and www.SurveyMonkey.com
May 13, 2016	Second meeting of the MAPP Steering Committee to review findings of the FoC Assessment
June 3, 2016	Third meeting of the MAPP Steering Committee to review findings of the Community Health Status Assessment (CHSA)
June 24, 2016	Fourth meeting of the MAPP Steering Committee to review findings of the LPHSA and CTSA
July 29, 2016	Fifth meeting of the MAPP Steering Committee to review and discuss assessments to aid in the identification of strategic health priorities. Healthy families and Healthy Babies, Healthiest Weight, Behavioral Health, and Access to Care were selected as strategic health priorities
August 26, 2016	Sixth meeting of the MAPP Steering Committee to develop goals for each of the four strategic health priorities.
October 21, 2016	Seventh meeting of the MAPP Steering Committee to develop strategic objectives
January 20, 2017	Eighth meeting of the MAPP Steering Committee to review and refine the action plan and select committee leaders for each of the four health priority areas
April 6, 2017	DOH-Duval hosted a public health conference, <i>Creating a Healthier Jacksonville</i> , during National Public Health Week Presenters and topics aligned with the CHA/CHIP to promote work being done
April 28, 2017	Ninth meeting of the MAPP Steering Committee to further review CHIP action plans and to discuss next steps for health priority committees including membership, meeting frequency, and roles and expectations

April 2017-Current	Committees met monthly to provide updates on activities, discuss challenges experienced, plan next steps, and identify and engage community members in the process. Committees adopted a placed-based approach to health improvement efforts, reviewed sub-county level data (i.e., census tract and zip code), and selected the neighborhoods of Hillcrest and Hyde Park as the focus of health improvement efforts and initiatives
November 17, 2017	Tenth meeting of the MAPP Steering Committee to provide updates on progress made in each of the priority areas and discuss next steps
May 22, 2018	DOH-Duval attended the Future of Healthcare Conference to promote the Duval County CHA and CHIP to local health professionals
June 15, 2018	Over 80 community partners attended the 2018 review meeting of the Duval County CHIP to discuss progress made, barriers and challenges encountered, and next steps
July 3, 2018	DOH-Duval met with the Northeast Florida Nonprofit Hospital Partnership to discuss the Duval County CHIP and the approach taken for health improvement efforts
February 15, 2019	Over 50 community partners attended the 2019 review meeting of the Duval County CHIP to review efforts and discuss next steps. Moving forward, health improvement activities and initiatives will be tailored to meet the unique needs of Hillcrest and Hyde Park

^{*} Subcommittees held monthly meetings throughout 2017 and 2018

Strategic Issue Areas

Strategic Health Priority Area #1: Healthy Families and Healthy Babies

Action Plans			
		ealthy Families and Healthy Babies mortality and morbidity	
Objective 1.1a	Action	Status	Contributing Partners
By December 2021, reduce the black-white infant mortality gap from 2.5 to 2.2 (Source: Florida Department of Health, Bureau of Vital Statistics)	Use data to identify at-risk neighborhoods and implement targeted interventions in those areas.	Completed: Identified two neighboring census tracts in the Westside of Jacksonville – census tract 122 (Hillcrest neighborhood) and census tract 126.02 (Hyde Park neighborhood)	DOH-Duval Office of Performance Improvement/Healthy Jacksonville; Duval County CHIP committee partners
	Research and compile a comprehensive list of existing community resources and programs in identified high-risk areas.	Completed: An inventory of community locations was developed for both census tract 122 and 126.02	DOH-Duval Office of Performance Improvement/Healthy Jacksonville
	Develop and implement an action plan to increase the number of Healthy Start screenings.	Completed: An action plan to increase Healthy Start screenings and three strategies to increase retention in Healthy Start were implemented	DOH-Duval Healthy Start; DOH-Duval Nurse Family Partnership; DOH-Duval Women, Infants, and Children (WIC); DOH-Duval Magnolia
	Implement strategies to increase retention in Healthy Start.	Completed: Retention strategies included increasing face to face contacts, reflective supervision, and motivational intervention training	
	Develop and implement protocol for mandatory behavioral health screening of Healthy Start and DOH-Duval maternity clients.	Completed	DOH-Duval Healthy Start; DOH-Duval Nurse Family Partnership; DOH-Duval Women, Infants, and Children (WIC); DOH-Duval Magnolia

	Develop and implement a Safe Sleep campaign.	Completed	DOH-Duval Healthy Start; DOH-Duval Marketing and Communications
	Collect qualitative data to increase understanding of factors impacting infant mortality.	Ongoing	Northeast Florida Healthy Start Coalition; DOH-Duval Maternal and Child Health; DOH-Duval Office of Performance Improvement/Healthy Jacksonville
	Develop and foster strategic partnerships in identified neighborhoods.	Ongoing	DOH-Duval Office of Performance Improvement/Healthy Jacksonville; Safe Kids Northeast Florida THE PLAYERS Center for Child Health/Wolfson Children's Hospital; Angel Kids Pediatrics; New Town Success Zone; The Potter's House Ministries/Temple Builders; Community Health Outreach; Emergency Pregnancy Services; St. Vincent's
	Ensure pregnant women are screened for the Social Determinants of Health and provided referrals to appropriate resources and services.	Ongoing	DOH-Duval Healthy Start; DOH-Duval Magnolia; DOH-Duval Women, Infants, and Children (WIC); Angel Kids Pediatrics
	Increase the number of women who receive interconceptional health education.	Ongoing	DOH-Duval Healthy Start; Northeast Florida Healthy Start Coalition; DOH- Duval Women, Infants, and Children (WIC); Angel Kids Pediatrics; Community Health Outreach
	Increase education and outreach focusing on male caregivers.	Ongoing	Northeast Florida Healthy Start Coalition Fatherhood PRIDE, St. Vincent's Brighter Beginnings; New Town Success Zone
	Educate DOH-Duval and key partners on ACEs and toxic stress.	Ongoing	DOH-Duval Office of Performance Improvement/Healthy Jacksonville
	Promote and increase access to long acting reversible contraception (LARC) in the community.	Ongoing	DOH-Duval Family Planning; DOH- Duval Healthy Start; DOH-Duval Magnolia; Community Health Outreach

Strategic Health Priority Area 1: Healthy Families and Healthy Babies				
Goal 1.1: Reduce infant mortality and morbidity				
Objective 1.1b	Action	Status	Contributing Partners	
By December 2021, increase the percent of births to mothers who receive prenatal care beginning in the first trimester from 66.1% to 72.7% (Source: Florida Department of Health, Bureau of Vital Statistics)	Use data to identify at-risk neighborhoods and implement targeted interventions in those areas.	Completed: Identified two neighboring census tracts in the Westside of Jacksonville – census tract 122 (Hillcrest neighborhood) and census tract 126.02 (Hyde Park neighborhood)	DOH-Duval Office of Performance Improvement/Healthy Jacksonville; Duval County CHIP committee partners	
	Research and compile a comprehensive list of existing community resources and programs in identified high-risk areas.	Completed: An inventory of community locations was developed for both census tract 122 and 126.02	DOH-Duval Office of Performance Improvement/Healthy Jacksonville	
	Identify entry points for prenatal care and education in the community with an emphasis on the uninsured or underinsured.	Completed	DOH-Duval Maternal and Child Health; St. Vincent's Hospital	
	Develop and foster strategic partnerships in identified neighborhoods	Ongoing	DOH-Duval Office of Performance Improvement/Healthy Jacksonville; Safe Kids Northeast Florida THE PLAYERS Center for Child Health/Wolfson Children's Hospital; Angel Kids Pediatrics; New Town Success Zone; The Potter's House Ministries/Temple Builders; Community Health Outreach; Emergency Pregnancy Services; St. Vincent's	
	Conduct campaign(s) to promote prenatal care among target populations.	In progress	DOH-Duval, Wolfson Children's Hospital; Northeast Florida Healthy Start Coalition; Kohl's Ready, Set, Sleep; St Vincent's Bright Beginnings Courses; UF Health; Memorial Hospital	

Promote awareness of Medicaid benefits, such as transportation and family planning.	In progress	THE PLAYERS Center for Child Health/Wolfson Children's Hospitals
Expand community health worker programs to increase access to prenatal care among at-risk and underserved populations.	In progress	St. Vincent's Emergency Program; DOH- Duval; Faith-based organizations
Engage existing collaborative/task forces to coordinate activities to increase awareness of the benefits of early entry into prenatal care.	Not started	Northeast Florida Healthy Start Coalition; DOH-Duval Maternal and Child Health; DOH-Duval Office of Performance Improvement/Healthy Jacksonville

Policies and Programs

Below is a list of various programs and policies that support efforts to reduce infant mortality and morbidity and increase early entry into prenatal care, while also addressing health equity.

Breastfeeding promotion programs

Provide education, information, counseling, and support for breastfeeding to women throughout pre- and post-natal care

Family/caregiver centered education

• Ensure that public education to prevent SIDS and other sleep-related infant deaths reaches a wide constellation of potential caregivers for infants

Centering Pregnancy

Provides prenatal care in a group setting, integrating health assessment, education, and support Comprehensive approach to women's health

Support a comprehensive approach to women's health—including integration of reproductive planning into women's routine health care—as good health before conception can improve pregnancy outcomes; this should include addressing mental/behavioral health and social support needs, as well as increasing the interval between pregnancies to at least 12 months

Early childhood home visiting programs

 Provide at-risk expectant parents and families with young children with information, support, and training regarding child health, development, and care from prenatal stages through early childhood via trained home visitors

Early Head Start (EHS)

 Provide child care, parent education, physical health and mental health services, and other family supports to pregnant women and parents with low incomes and children aged 0 to 3

Enhanced services for Medicaid enrollees

Target high-risk Medicaid enrollees with enhanced prenatal services, such as nutrition counseling, mental health services and care coordination.

Long-acting reversible contraception (LARC) access

· Increase access to LARCs through cost reduction, comprehensive birth control counseling, provider training, and efforts to ensure availability at local clinics

Prenatal and newborn screenings

· Increase public education and awareness about prenatal and newborn screenings and ensure funding for those screenings

Presumptive eligibility under Medicaid

 Expand and streamline prenatal coverage for pregnant women. Educates public about "presumptive eligibility" under Medicaid, which allows immediate access to prenatal care services for pregnant women while eligibility is determined

Social determinants of health

 Continue to address the underlying causes of infant mortality and poor health outcomes by focusing on social determinants of health, for example, investing in under-resourced communities and efforts to ameliorate the effects of poverty on families during childbearing years

Substance use screenings

 Sustain funding for substance use screening among pregnant women and for treatment specifically designed for pregnant women who use alcohol or drugs

Women, Infants and Children Program (WIC)

A federally funded nutrition program for Women, Infants, and Children. WIC provides the following at no cost: healthy foods, nutrition education and counseling, breastfeeding support, and referrals for health care and community services.

Strategic Health Priority Area #2: Healthiest Weight

Action Plans				
		Area 2: Healthiest Weight	,	
	Goal 2.1: Increase the percent of childre	n and adults who are at a healthy weigr	t	
Objective 2.1a	Action	Status	Contributing Partners	
By December 2021, increase the percentage of adults who have a healthy weight from 32.6% to 35.9% (Source: Behavioral Risk Factor Surveillance Survey)	Identify high-risk areas (census tract, zip codes, communities) to implement interventions and programs.	Completed: Identified two neighboring census tracts in the Westside of Jacksonville – census tract 122 (Hillcrest neighborhood) and census tract 126.02 (Hyde Park neighborhood)	DOH-Duval Office of Performance Improvement/Healthy Jacksonville; Duval County CHIP committee partners	
	Research and compile a comprehensive list of existing community resources and programs in identified high-risk areas.	Completed: An inventory of community locations was developed for both census tract 122 and 126.02	DOH-Duval Office of Performance Improvement/Healthy Jacksonville	
	Promote physical activity guidelines with family child care providers and child care centers.	Completed	DOH-Duval Office of Performance Improvement/Healthy Jacksonville; Child care centers	
	Apply and achieve Gold recognition Florida Healthy School District.	Completed	Duval County Public Schools; DOH- Duval Office of Performance Improvement/Healthy Jacksonville	
	Promote the usage of the CDC Worksite Health ScoreCard to community partners.	Completed	DOH-Duval Office of Performance Improvement/Healthy Jacksonville	
	Develop and foster strategic partnerships in identified neighborhoods.	Ongoing	DOH-Duval Office of Performance Improvement/Healthy Jacksonville; Safe Kids Northeast Florida THE PLAYERS Center for Child Health/Wolfson Children's Hospitals; Angel Kids Pediatrics; New Town Success Zone; The Potter's House Ministries/Temple Builders; AARP; Timucuan Parks Foundation; Humana; Northeast Florida AHEC; Jacksonville Sherriff's Office	

	Promote usage of county parks, trails, and recreational facilities.	Ongoing	DOH-Duval Office of Performance Improvement/Healthy Jacksonville; Timucuan Parks Foundation; AARP; Humana
	Increase the number of shared-use agreements for community-based facilities available for recreational physical activity.	Ongoing	Humana; City of Jacksonville (Parks & Rec Council); Duval County Public Schools
	Partner with Duval County Public Schools to establish policies and practices that promote physical activity throughout the school day and include before and after school activities, such as: active recess, active classrooms, and before and after school activities.	Ongoing	DOH-Duval Office of Performance Improvement/Healthy Jacksonville; Duval County Public Schools; Jacksonville Children's Commission; Alliance for a Healthier Generation
	Develop and implement a comprehensive communication campaign about new and existing community resources and programs.	Not started	To be determined
		Area 2: Healthiest Weight	
	Goal 2.2: Increase access to	nutritious and affordable food	
Objective 2.2a	Action	Status	Contributing Partners
By December 2021, decrease the percentage of the population who lack adequate access to food from 20.1% to 18.1% (Source: Map the Meal Gap, Feeding America)	Identify high-risk areas (census tract, zip codes, communities) to implement interventions and programs.	Completed: Identified two neighboring census tracts in the Westside of Jacksonville – census tract 122 (Hillcrest neighborhood) and census tract 126.02 (Hyde Park neighborhood) in zip codes 32205 and 32210	DOH-Duval Office of Performance Improvement/Healthy Jacksonville; Duval County CHIP committee partners
		Completed: An inventory of community locations was developed for both census tract 122 and 126.02	DOH-Duval Office of Performance Improvement/Healthy Jacksonville

	Promote nutrition guidelines with family child care providers and child care centers.	Completed	DOH-Duval Office of Performance Improvement/Healthy Jacksonville; DOH- Duval Women, Infants, and Children (WIC); University of Florida, Institute for Food and Agricultural Sciences; Child care centers
	Contact Early Care and Education stakeholders to identify opportunities for collaboration to serve at-risk populations.	Completed	DOH-Duval Office of Performance Improvement/Healthy Jacksonville; Early Childhood Coalition
	Develop and foster strategic partnerships in identified neighborhoods.	Ongoing	DOH-Duval Office of Performance Improvement/Healthy Jacksonville; Safe Kids Northeast Florida THE PLAYERS Center for Child Health/Wolfson Children's Hospitals; Angel Kids Pediatrics; New Town Success Zone; The Potter's House Ministries/Temple Builders; AARP; Timucuan Parks Foundation; Humana; Northeast Florida AHEC; St. Vincent's; Daily Manna; University of North Florida; University of Florida, Institute for Food and Agricultural Sciences
	Collaborate with DOH-Duval WIC and Supplemental Nutrition Assistance Program (SNAP) to expand opportunities to purchase healthy foods for users of these services.	Ongoing	DOH-Duval Women, Infants, and Children (WIC)
	Establish new school and community gardens.	Ongoing	University of Florida, Institute for Food and Agricultural Sciences; Duval County Public Schools; The Potter's House Ministries; Local community organizations
	Increase SNAP enrollment.	Ongoing	DOH-Duval Nutrition and Chronic Disease; ElderSource

	Increase participation in federally funded child nutrition programs (i.e. school lunch, breakfast, and summer food service programs).	Ongoing	DOH-Duval Women, Infants, and Children (WIC); DOH-Duval Marketing and Communications; Duval County Public Schools; Chartwells
	Create opportunities for SNAP recipients to receive nutrition education and healthy recipes.	Ongoing	DOH-Duval Women, Infants, and Children (WIC); War on Poverty; University of Florida, Institute for Food and Agricultural Sciences

Policies and Programs

The following section is a list programs and policies that support efforts to reduce obesity and increase access to healthy, affordable foods.

Community gardens

Establish and support land that is gardened or cultivated by community members via community land trusts, gardening education, zoning regulation changes, or service provision (e.g., water or waste disposal)

Competitive pricing for healthy foods

 Assign higher costs to non-nutritious foods than nutritious foods via incentives, subsidies, or price discounts for healthy foods and beverages or disincentives or price increases for unhealthy choices

Complete Streets

 Enhance streetscapes with greater sidewalk coverage and walkway connectivity, street crossing safety features, traffic calming measures, and other design elements

Farmers markets

• Support multiple vendor markets where producers sell goods such as fresh fruit and vegetables, meat, dairy items, and prepared foods directly to consumers

Farm to school programs

Incorporate locally grown foods into school meals and snacks, often with visits from food producers, cooking classes, nutrition and waste reduction efforts, and school gardens

Healthy food in convenience stores

• Encourage convenience stores, corner stores, or gas station markets to carry fresh produce and other healthier food options

Healthy food initiatives in food banks

· Combine hunger relief efforts with nutrition information and healthy eating opportunities, often with on-site cooking demonstrations, recipe tastings, produce display stands, etc.

Mobile markets

 Support fresh food carts or vehicles that travel to neighborhoods on a set schedule to sell fresh fruits and vegetables

New grocery stores in underserved areas

Attract new grocery stores that sell a variety of fresh foods, baked goods, packaged, and frozen items to underserved areas via financing initiatives or zoning regulation

Point-of-purchase prompts for healthy foods

· Place motivational signs on posters, front of package labels, or shelf labels near fruits, vegetables and other items that encourage individuals to purchase healthier food options

Safe Routes to School

Promote walking and biking to school through education, incentives, and environmental changes; often called SRTS

School breakfast programs

 Support programs to provide students with a nutritious breakfast in the cafeteria, from grab and go carts in hallways, or in classrooms

School fruit and vegetable gardens

Establish designated areas where students can garden with guidance, often with nutrition and food preparation lessons and opportunities for taste tasting and hands-on learning

School nutrition standards

Regulate the quality of food that can be sold to students via the National School Lunch Program, à la carte options, vending machines, etc.

Shared use agreements

 Create contracts that support community access to existing facilities (e.g., schools, churches, etc.) before or after business hours; also called joint use, open use, or community use agreements

WIC and Senior Farmers' Market Nutrition Programs

Support Farmers' Market Nutrition Programs, which provide WIC and Senior Nutrition Program

participants with coupons for fresh, unprepared, locally grown fruits and vegetables

Strategic Health Priority Area #3: Behavioral Health

Action Plans					
Strategic Health Priority Area 3: Behavioral Health Goal 3.1: Decrease suicide in Duval County					
Objective 3.1a	Action	Status	Contributing Partners		
By December 2021, decrease the age-adjusted suicide death rate from 13.1/100,000 to 11.8/100,000 (Source: Florida Department of Health, Bureau of Vital Statistics)	Identify high-risk areas (census tract, zip codes, communities) to implement interventions and programs.	Completed: Identified two neighboring census tracts in the Westside of Jacksonville – census tract 122 (Hillcrest neighborhood) and census tract 126.02 (Hyde Park neighborhood) in zip code 32210	DOH-Duval Office of Performance Improvement/Healthy Jacksonville; Duval County CHIP committee partners		
	Research and compile a comprehensive list of existing community resources and programs in identified high-risk areas.	Completed: An inventory of community locations was developed for both census tract 122 and 126.02	DOH-Duval Office of Performance Improvement/Healthy Jacksonville		
	Establish a Behavioral Health Consortium in Duval County.	Completed	LSF Health Systems; Department of Children and Families		
	Develop and foster strategic partnerships in identified neighborhoods.	Ongoing	DOH-Duval Office of Performance Improvement/Healthy Jacksonville; Safe Kids Northeast Florida THE PLAYERS Center for Child Health/Wolfson Children's Hospitals; Angel Kids Pediatrics; New Town Success Zone; The Potter's House Ministries/Temple Builders; AARP; Mental Health America; American Foundation for Suicide Prevention; Jacksonville Nonprofit Hospital Partnership; United Way Full Service Schools		
	Identify and promote a youth texting hotline, such as Crisis Text Line.	Ongoing	JASMYN; University of North Florida; American Foundation for Suicide Prevention		

	Train 10,000 Northeast Florida residents in Mental Health First Aid.	Ongoing	Jacksonville Non-Profit Hospital Partnership; Mental Health America; Northeast Florida AHEC
	Assess current mental health student education and resources.	Not started	Duval County Public Schools; Jacksonville System of Care Initiative; LSF Health Systems; Duval County Behavioral Health Consortium
	Engage Duval County Public Schools Office of School Culture and Climate to develop work plan to address depression, suicide, and bullying among youth.	Not started	Duval County Public Schools (Office of School Culture and Climate); DOH-Duval Office of Performance Improvement/Healthy Jacksonville
	Coordinate training for pediatricians to screen for childhood trauma.	Not started	Jacksonville System of Care Initiative; Duval County Medical Society; DOH- Duval Office of Performance Improvement/Healthy Jacksonville
Develop and disseminate a mental health advocacy campaign to increase awareness and reduce stigma.		Not started	DOH-Duval Office of Performance Improvement/Healthy Jacksonville; Mental Health America; Stronger than Stigma; LSF Health Systems; NAMI (National Association of Mental Illness)
	Strategic Health Priority		
	Goal 3.2: Reduce opioid over	dose deaths in Duval County	
Objective 3.2a	Action	Status	Contributing Partners
By December 2021, reduce opioid overdose deaths from 38.6/100,000 to 34.7/100,000 (Source: UF FROST)	Identify high-risk areas (census tract, zip codes, communities) to implement interventions and programs.	Completed: Identified two neighboring census tracts in the Westside of Jacksonville – census tract 122 (Hillcrest neighborhood) and census tract 126.02 (Hyde Park neighborhood) in zip code 32210	DOH-Duval Office of Performance Improvement/Healthy Jacksonville; Duval County CHIP committee partners
		Completed: An inventory of community locations was developed for both census tract 122 and 126.02	DOH-Duval Office of Performance Improvement/Healthy Jacksonville

34 | P a g e

Develop and foster strategic partnerships in identified neighborhoods.	Ongoing	DOH-Duval Office of Performance Improvement/Healthy Jacksonville; Safe Kids Northeast Florida THE PLAYERS Center for Child Health/Wolfson Children's Hospitals; Angel Kids Pediatrics; New Town Success Zone; The Potter's House Ministries/Temple Builders; AARP; Jacksonville Sheriff's Office; Drug Free Duval; Jacksonville Fire and Rescue Department; Northeast Florida AHEC; Humana; CareerSource of Northeast Florida
Increase availability of Narcan and train first responders to administer prior to medical personnel order.	Ongoing	Jacksonville Sheriff's Office; Drug Free Duval; Jacksonville Fire and Rescue Department; Northeast Florida AHEC
Educate providers about the issue and resources to assist in patient management.	Ongoing	DOH-Duval Office of Performance Improvement/Healthy Jacksonville; Northeast Florida AHEC; Drug Free Duval
Assess feasibility of increasing Narcan prescriptions for community members (users, friends, family).	Ongoing	Drug Free Duval; Duval County Medical Society; Clinton Foundation
Raise awareness of and increase utilization of medications to prevent respiratory arrest.	Ongoing	Northeast Florida AHEC; Drug Free Duval
Hold provider trainings on Florida laws and policies related to prescribing Narcan.	Ongoing	Northeast Florida AHEC; Drug Free Duval
Increase awareness of Florida laws on Good Samaritan 911.	Ongoing	Northeast Florida AHEC; Drug Free Duval

Policies and Programs

Below is a summary of programs and policies that support efforts to reduce deaths due to suicide and opioid overdose.

Behavioral health primary care integration

Revise health care processes and provider roles to integrate mental health and substance abuse treatment into primary care; continue to refer patients with severe conditions to specialty care

Crisis lines

 Provide free and confidential counseling and service referrals via telephone-based conversation, web-based chat, or text message to individuals in crisis, particularly those with severe mental health concerns

Drug courts

 Use specialized courts to offer criminal offenders with drug dependency problems an alternative to adjudication or incarceration

Employee Assistance Programs (EAP)

Provide confidential worksite-based counseling and referrals to employees to address personal and workplace challenges

Family treatment drug courts

 Use specialized courts to work with parents involved in the child welfare system who may lose custody of their children due to substance abuse

Functional Family Therapy (FFT)

 Introduce a short-term family-based intervention therapy focused on strengths, protective factors and risk factors for youth with delinquency, violence, or substance abuse problems, and their families

Good Samaritan drug overdose laws

 Provide immunity from arrest, charge, or prosecution for drug possession or paraphernalia when individuals experiencing or witnessing drug overdose summon emergency services

Mental health benefits legislation

 Regulate mental health insurance to increase access to mental health services, including treatment for substance use disorders

Mental Health First Aid

Provide an 8 or 12 hour training to educate laypeople about how to assist individuals with mental health problems or at risk for problems such as depression, anxiety, and substance use disorders

Naloxone education and distribution programs

 Support community members who are likely to encounter individuals who might overdose with education and training to administer naloxone and ensure all first responders are trained and authorized to administer naloxone

Prescription drug monitoring programs (PDMPs)

Use databases, housed in state agencies, to track prescribing and dispensing of Schedule II, III, IV, and V drugs and other controlled substances

Proper drug disposal programs

 Establish programs that accept expired, unwanted, or unused medicines from designated users and dispose of them responsibly

Trauma-informed health care

Shift the way health care organizations approach trauma by adopting universal trauma precautions and providing trauma-specific care

Trauma-informed schools

Adopt a multi-tiered approach within schools to address the needs of trauma-exposed youth, including school-wide changes, screenings, and individual intensive support

Youth peer mentoring

Establish an ongoing relationship between an older youth or young adult and a younger child or adolescent, usually an elementary or middle school student; also called cross-age peer mentoring

Strategic Health Priority Area #4: Access to Care

Action Plans							
	Strategic Health Priority Area 4: Access to Care Goal 4.1: Decrease barriers to accessing care						
		ners to accessing care					
Objective 4.1a	Objective 4.1a Action Status Contributing Partner						
By December 2021, reduce the HIV incidence rate in Duval County from 30.0/100,000 to 27.0/100,000 (Source: Florida Department of Health, HIV/AIDS Section)		Completed: Identified two neighboring census tracts in the Westside of Jacksonville – census tract 122 (Hillcrest neighborhood) and census tract 126.02 (Hyde Park neighborhood)	DOH-Duval Office of Performance Improvement/Healthy Jacksonville; Duval County CHIP committee partners				
	Research and compile a comprehensive list of existing community resources and programs in identified high-risk areas.	Completed: An inventory of community locations was developed for both census tract 122 and 126.02 in zip code 32210	DOH-Duval Office of Performance Improvement/Healthy Jacksonville				
	Develop and foster strategic partnerships in identified neighborhoods.	Ongoing	DOH-Duval Office of Performance Improvement/Healthy Jacksonville; New Town Success Zone; The Potter's House Ministries/Temple Builders; UF Health Jacksonville; DOH-Duval Disease Control; Planned Parenthood; JASMYN				
	Implement plan to increase routine HIV testing in traditional medical settings.	In progress	DOH-Duval Disease Control; Duval County Medical Society; UF Health Jacksonville; JASMYN				
	Implement targeted, community-based HIV testing and education projects.	In progress	DOH-Duval Disease Control; Centers for Disease Control; JASMYN; Duval County Public Schools; United Way Full Service Schools				
	Partner with local agencies to increase awareness of existing HIV and STD testing and treatment sites.	In progress	DOH-Duval Disease Control; UF Health Jacksonville; Local community-based organizations (barber shops, etc.)				

	Dravida tachnical assistance visita to tan				
	Provide technical assistance visits to top 20 medical providers to disseminate information on HIV treatment guidelines.	Not started	DOH-Duval Disease Control		
	Strategic Health Priority	Area 4: Access to Care			
	Goal 4.1: Decrease bar	riers to accessing care			
Objective 4.1b	Action Status Contributing Partners				
By December 2021, reduce the incidence rate of bacterial STDs in Duval County from 1,049.9/100,000 to 944.9/100,000 (Source: Florida Department of Health, Bureau of Communicable Diseases)	Identify high-risk areas (census tract, zip codes, communities) to implement interventions and programs.	Completed: Identified two neighboring census tracts in the Westside of Jacksonville – census tract 122 (Hillcrest neighborhood) and census tract 126.02 (Hyde Park neighborhood) in zip code 32210	DOH-Duval Office of Performance Improvement/Healthy Jacksonville; Duval County CHIP committee partners		
	Research and compile a comprehensive list of existing community resources and programs in identified high-risk areas.	Completed: An inventory of community locations was developed for both census tract 122 and 126.02	DOH-Duval Office of Performance Improvement/Healthy Jacksonville		
	Develop and foster strategic partnerships in identified neighborhoods.	Ongoing	DOH-Duval Office of Performance Improvement/Healthy Jacksonville; New Town Success Zone; The Potter's House Ministries/Temple Builders; UF Health Jacksonville; DOH-Duval Disease Control; Planned Parenthood; JASMYN		
	Increase routine STD testing in traditional medical settings through formal STD presentations to top 20 provider groups, DOH sites and 4 major hospitals. Presentations should include STD info related to: prevalence, rate increases, ramifications (to both individuals and community), and the ability/benefits of using Expedited Partner Therapy (EPT).	Not started	DOH-Duval Disease Control; Duval County Medical Society; Hispanic Medical Society		
	Provide technical assistance visits to top 20 medical providers to disseminate information on STD treatment guidelines and Expedited Partner Therapy (EPT).	Not started	DOH-Duval Disease Control; Duval County Medical Society; Hispanic Medical Society		

Strategic Health Priority Area 4: Access to Care				
	Goal 4.1: Decrease bar	riers to accessing care		
Objective 4.1c	Action	Status	Contributing Partners	
By December 2021, decrease the rate of preventable hospitalizations under the age of 65 from all conditions from 1,416.2/100,000 to 1,274.6/100,000 (Source: Florida Agency for Health Care	Identify the top 5 conditions associated with preventable hospitalizations in Duval County to inform programs and interventions.	Completed: The following were the top 5 ambulatory care sensitive conditions in Duval County in 2016: (1) cellulitis; (2) COPD; (3) congestive heart failure; (4) diabetes; and (5) bacterial pneumonia	DOH-Duval Office of Performance Improvement/Healthy Jacksonville	
Administration (AHCA))	Identify high-risk areas (census tract, zip codes, communities) to implement Completed: Identified two neighboring census tracts in the Westside of Jacksonville – census tract 122 (Hillcrest In	DOH-Duval Office of Performance Improvement/Healthy Jacksonville; Duval County CHIP committee partners		
	Research and compile a comprehensive list of existing community resources and programs in identified high-risk areas.	Completed: An inventory of community locations was developed for both census tract 122 and 126.02	DOH-Duval Office of Performance Improvement/Healthy Jacksonville	
	Provide Community Health Worker training in Duval County.	Completed	DOH-Duval Office of Performance Improvement/Healthy Jacksonville; Community Health Worker Coalition	
	Develop and foster strategic partnerships in identified neighborhoods	Ongoing	DOH-Duval Office of Performance Improvement/Healthy Jacksonville; New Town Success Zone; The Potter's House Ministries/Temple Builders; Daily Manna; AARP; St. Vincent's Mobile Health Ministries; Community Health Outreach; Humana; Northeast Florida AHEC; American Heart Association; American Lung Association; CareerSource of Northeast Florida	
	Develop marketing materials/campaigns to increase the use of available resources and programs including community-based health centers and mobile health units including schedules, locations, and services offered.	In progress	DOH-Duval Office of Performance Improvement/Healthy Jacksonville; DOH- Duval Marketing and Communications; St. Vincent's Mobile Health Ministries; Community Health Outreach; CareerSource of Northeast Florida	

Develop a guide to market existing community programs and resources.	Not started	To be determined

Policies and Programs

Below is a list of programs and policies that support efforts to decrease HIV and STD incidence and increase access to care and services.

Behavioral interventions to prevent HIV and other STDs

Use individual, group, and community-level interventions to provide education, support, and training that can affect social norms about HIV and other STDs

Chronic disease management programs

 Implement multi-component efforts that include coordination of health services by multidisciplinary teams of health care professionals, patient self-management, and patient education

Chronic disease self-management (CDSM) programs

Provide educational and behavioral interventions that support patients' ability to actively manage their condition(s) in everyday life

Comprehensive risk reduction sexual education

Provide information about contraception and protection against sexually transmitted infections (STDs) in classroom or community settings

Computer-based interventions to prevent HIV and other STDs

· Provide tailored health information and computer-mediated decision making, behavior change, and emotional support via interactive programs

Condom availability programs

Provide condoms free of charge or at a reduced cost in community and school-based settings

Culturally adapted health care

· Tailor health care to patients' norms, beliefs, and values, as well as their language and literacy skills

Expedited partner therapy for treatable STDs

Provide prescriptions or medications to patients diagnosed with treatable STDs to give to their partners without provider visits; also called patient-delivered partner therapy (PDPT)

Federally qualified health centers (FQHCs)

Increase support for non-profit health care organizations and deliver comprehensive care to uninsured, underinsured, and vulnerable patients regardless of ability to pay; often called community health centers (CHCs)

Health insurance enrollment outreach and support

 Provide health insurance outreach and support to assist individuals whose employers do not offer affordable coverage, who are self-employed, or who are unemployed

Health literacy interventions

Increase patients' health-related knowledge via efforts to simplify health education materials, improve patient-provider communication, and increase overall literacy

HIV/STD partner notification by providers

 Elicit information about sex or needle-sharing partners from STI-positive patients, then notify partners of risk, testing, and services; also called contact tracing, or partner counseling and referral services

Medical homes

 Provide continuous, comprehensive, whole person primary care that uses a coordinated team of medical providers across the health care system

Mobile reproductive health clinics

Offer reproductive health services (e.g., pregnancy tests, prenatal and postpartum care, gynecological exams, STD screenings), health education, and social service referrals via medically equipped vans

Patient navigators

• Provide culturally sensitive assistance and care coordination, and guide patients through available medical, insurance, and social support; also called systems navigators

School-based health centers

· Provide health care services on school premises to attending elementary, middle, and high

school students; services provided by teams of nurses, nurse practitioners, and physicians	

Appendices

A. Alignment

Appendix A: Alignment

Strategic Health Priority Area 1: Healthy Families and Healthy Babies

	Alignment			
Duval County CHIP Objectives	DOH-Duval Strategic Plan	Florida SHIP	Florida Strategic Plan	Healthy People 2020
Objective 1.1a By December 2021, reduce the black-white infant mortality gap from 2.5 to 2.2	1.1a 1.2a 1.2b	MCH1.1 MCH1.2	1.1.1	MICH-1 MICH-8 MICH-9
Objective 1.1b By December 2021, increase the percent of births to mothers who receive prenatal care beginning in the first trimester from 66.1% to 72.7%	1.2b	MCH2.2	1.1.1	MICH-10 MICH-16

Strategic Health Priority Area 2: Healthiest Weight

	Alignment			
Duval County CHIP Objective	DOH-Duval Strategic Plan	Florida SHIP	Florida Strategic Plan	Healthy People 2020
Objective 2.1a By December 2021, increase the percentage of adults who have a healthy weight from 32.6% to 35.9%	4.2a	HW1.1.5	2.1.1	NWS-8 NWS-9 NWS-10 NWS-11
Objective 2.2.a By December 2021, decrease the percentage of the population who lack adequate access to food from 20.1% to 18.1%		HW1.1.4		NWS-1 NWS-2 NWS-3 NWS-4 NWS-12 NWS-13

Strategic Health Priority Area 3: Behavioral Health

	Alignment			
Duval County CHIP Objective	DOH-Duval Strategic Plan	Florida SHIP	Florida Strategic Plan	Healthy People 2020
Objective 3.1a By December 2021, decrease the age-adjusted suicide death rate from 13.1/ 100,000 to 11.8/ 100,000		BH1.2 BH4.1 BH4.2		MHMD-1 MHMD-2
Objective 3.2a By December 2021, reduce opioid overdose deaths from 38.6/100,000 to 34.7/100,000		BH2.1 BH3.1	3.1.6	MICH-11.4 SA-12 SA-13.3 SA-19.1

Strategic Health Priority Area 4: Access to Care

	Alignment			
Duval County CHIP Objective	DOH-Duval Strategic Plan	Florida SHIP	Florida Strategic Plan	Healthy People 2020
Objective 4.1a By December 2021, reduce the HIV incidence rate in Duval County from 30.0/100,000 to 27.0/100,000	2.1a 2.1b	ID2.1 ID2.2	2.1.5	HIV-1 HIV-2 HIV-8
Objective 4.1b By December 2021, reduce the incidence rate of bacterial STDs in Duval County from 1,049.9/100,000 to 944.9/100,000	2.1c	ID1.1 ID1.2	2.1.5	STD-1 STD-6 STD-7 STD-8
Objective 4.1c By December 2021, decrease the rate of preventable hospitalizations under the age of 65 from all conditions from 1,416.2/100,000 to 1,274.6/100,000		CD1.1 CD1.2 CD1.3 CD2.1	2.1.2	AHS-5 AHS-6 AHS-7 AHS-8